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UTILITY  
PATENT APPLICATION  
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

First Inventor

Raymond Heininger et al

Title

SIMULATED INTERACTIVE

Express Mail Label No.

031088 U.S. PTO  
10/121222

112603

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2.  Applicant claims small entity status.  
See 37 CFR 1.27.
3.  Specification [Total Pages 17]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4.  Drawing(s) (35 U.S.C. 113) [Total Sheets 4]
5. Oath or Declaration [Total Sheets 2]
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
    - i.  DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6.  Application Data Sheet. See 37 CFR 1.76

7.  CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
  - a.  Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i.  CD-ROM or CD-R (2 copies); or
    - ii.  Paper
  - c.  Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9.  Assignment Papers (cover sheet & document(s))
10.  37 CFR 3.73(b) Statement  Power of Attorney  
(when there is an assignee)
11.  English Translation Document (if applicable)
12.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations
13.  Preliminary Amendment
14.  Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15.  Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16.  Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17.  Other: .....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation       Divisional       Continuation-in-part (CIP)      of prior application No.: .....

Prior application information:

Examiner \_\_\_\_\_

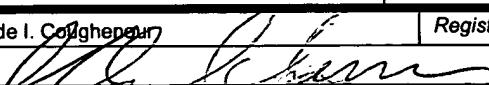
Art Unit: \_\_\_\_\_

For CONTINUATION OF DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

 Customer Number: \_\_\_\_\_ OR  Correspondence address below

Name	Clyde I. Coughenour		
Address	16607 Sutton Place		
City	Woodbridge	State	Virginia
Country	USA	Telephone	703-221-8677
Zip Code	22191		
Fax	703-221-8677		

Name (Print/Type)	Clyde I. Coughenour	Registration No. (Attorney/Agent)	33,083
Signature			
Date	November 26, 2003		

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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17224 U.S.PTO  
112603Approved for use through 10/31/2002, GMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
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# FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 385.00)

## Complete if Known

Application Number	
Filing Date	
First Named Inventor	Raymond H. Heininger et al
Examiner Name	
Art Unit	
Attorney Docket No.	

## METHOD OF PAYMENT (check all that apply)

 Check  Credit card  Money Order  Other  None
 Deposit Account:Deposit Account Number  
03-3382

Clyde I. Coughenour

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.
 

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 740	2001 370			Utility filing fee	385.00
1002 330	2002 165			Design filing fee	
1003 510	2003 255			Plant filing fee	
1004 740	2004 370			Reissue filing fee	
1005 150	2005 80			Provisional filing fee	
SUBTOTAL (1) (\$ 385.00)					

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

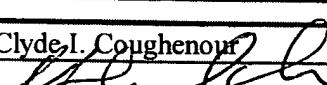
Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
			-20* =		
			-3** =		

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 18	2202 9			Claims in excess of 20	
1201 .84	.2201 42			Independent claims in excess of 3	
1203 280	2203 140			Multiple dependent claim, if not paid	
1204 .84	2204 42			** Reissue independent claims over original patent	
1205 18	2205 9			** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)					

\*or number previously paid, if greater; For Reissues, see above

\*\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY		(Complete if applicable)		
Name (First/Type):	Clyde I. Coughenour	Registration No. (Attorney/Agent):	33,083	Telephone: 703-221-8677
Signature:		Date:	26 Nov 2003	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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